Case: 1:23-cv-00039-MWM-KLII Doc #: 1 Filed: 01/23/23 Page: 1 of 28 PAGEID #: 1 For The Southern District of Ohio Plaintiff 23 14H 23 PM 12: 28 JAN 1 3 2023 Antonio Johnson #640-04-DEBORAH S. HUNT, Clerk 1724 St. Route 728 Lucasville, OH 45699 1:23CV039. Defendants J. McFARLAND ODRC 4545 fisher Rd MJ. LITKOVITZ Columbus, OH 43228 Annette Chambers-Smith 4545 fisher Rd Columbus, OH 43228 Ronald Endos 1724 St. Route 728 Lucasville, OH 45699 Linnea Mahlman 1724 St. Route 728 Lucasville, OH 45699 Sat. Jason Taylor 1724 st. Route 728 Lucasville, OH 45699 Officer Borders 1724 St. Route 728 Lucasville, OH 45699

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Officer Combitmerecv-00039-MWM-KLL Doc #:	1 Filed: 01/23/23 Page: 2 of 28 PAGEID #: 2
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Lixasville, OH 45699	
Lt. Bauer	
1724 st. Route 728	
Lucasville OH 45690	
Lt. B. Williams	
1724 St. Route 728	
LUCASVITE DH 45699	
Officer Stringer	
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Larry Greens	
Larry Greene)
1724 St. Route 728	
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Lucasville, OH 45699)
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This is a civil action authorized by the 42 U.S.C section 1983 to redress the deprivation, under color of state Law, of rights secured by the Constitution of the United States. The Court has Jurisdiction under 28.U.S.C. section 1331 and 1343 (a) (3). Plaintiff Antonio Johnson #640-044 seeks declaratory relief Pursuant to 28 U.S.C. section 2201 and 2202. Plaintiff's Claims for injunctive relief are authorized by 28 U.S.C. Section 2283 & 2284 and Rule 65 of the federal rules of Civil Procedure.

The United states district court for Southern District of Ohio is an appropriate Venue under 28 U.S.C. Section 1391 (B) (2) because it is where the events giving rise to this Claim Occured.

Plaintiff

Plaintiff Antonio Johnson #640-044, is and was all times Mentioned herein a Arisoner of the state of Ohio in the Costody of the Ohio Department of Rehabilitation and Corrections. He is currently confined in Southern Ohio Correctional Facility in Lucusville, Ohio.

Defendants

Failure To Protect From Harm:

Othio Department of Retrabilitation and Corrections in their official Capacity Under Color of state law as the Entity that Employs all of the Mentioned Defendants.

5. Failure To Protect From Harm:

4

Defendant, Annette Chambers-Smith is the Director of the State of Ohio. She is legally responsible for the Overall operation of the department and Each institution under its Jurisdiction, including Southern Ohio Correctional Facility.

6. Failure To Protect From Harm:

Defendant, Ronald Erdos at the time was acting superintendent/ Warden of Southern ohio correctional facility. He is Legally responsible for The operation of Southern Ohio Correctional facility and for the Welfare of all the inmates of the Prison.

Defendant, Linnea Mahlman is the institution Inspector of the ODRC who at all times mentioned in this complaint held the rank of institution inspector and is assigned to S.O.C.F.

- 8. Defendant, Jason Taylor is a sargent of the ODRC who at all times Mentioned in this complaint held the rank of sargent and was assigned to the SOC.F.
- 9. Defendant, Officer Borders is a Correctional officer of the ODRC who at all times mentioned in this Complaint held the rank of Correctional Officer of the S.O.C. Fand was assigned to the SQCF.
- 10. Defendant, Officer Crabtree is a Correctional Officer of the ODRC who at all times mentioned in this complaint held the rank of correctional officer and was assigned to the SO.C.F. II. Defendant, Lt. Bauer is a Leutenant of the ODRC who at all times mentioned in this complaint held the rank of Leutenant and was assigned to the S.O.C.F.

12. Defendant, Lt. B. Williams is a Leutenant of the ODRC who at all times mentioned in this complaint held the rank of

Leutenant and was assigned to the SO.C.F.

13. Defendant, Officer stringer is a correctional officer of the ODRC who at all times mentioned in this complaint held the rank of correctional officer and was assigned to the SO.C.F.

14. Defendant, officer John Doe is a correctional officer of the ODRC who at all times mentioned in this complaint held the Nank of correctional officer and was assigned to the SOC.F. 15. Defendant, Lt. John Doe is a Leutenant of the ODRC who at all times mentioned in this complaint held the Rank of Leutenant and was assigned to the S.O.C.F.

16. Defendant Larry Green is the Warden assistant/records Coordinator of the ohio Department of rehabilitation and Corrections who at all times mentioned in this complaint held the rank of Warden's assistant/records Coordinator and was assigned to the S.O.C.F.

17. Defendant, FLP. Mr. Conley is a FLP in medical of the ODRC who at all times mentioned in this complaint held the Rank of FLP in medical andwas assigned to the S.O.C. F.
18. Each Defendant is sued individually and in His/Her office I Capacity. It all times mentioned in this complaint Each Defendant acted Under Color of State Law.

Derelection of Duty:

19. Linnea Mahlman Violated My first Ameriment right redress to prievance and ODRC Policy 5120-9-31 and OFC 5120: 5120-9-31
Sec (a) state the DRC shall Provide inmates access to an immate prievance Procedure. This Procedure is designed to abbress the inmate complaints related to any aspect of institutional life that directly affect the prievance. This include Complaints reparding applications of Polices, Procedures, corditions of Confinement, or actions of institutional staff. Linnea Mahlmans Job duties are to rectify and resolve inmate complaints and stre failed to properly do her Job duty by denying My Camplaint in an attempt to cover up the Crimes that the mentioned Defendants Committed and to cover up the fact that my constitutional rights was violated Linnea Mahlman Violated My first Amendment regress to prievance.

Cruel and Unusual Punishment 20. On 1-7-2021 My cell window was covered up due to I was Using the Bathroom. Officer Borders and Sat Jason Taylor came to my cell and started to open the first Door an started Yelling an Verbally abusing me. I told the both of them to talk to me With respect like I was obing them. Sat Jason Taylor waved his O.C. Can at me tells me to shot the fuck up and theep my window clear "while he was Yelling at me an waving his O.C. I began to fear for my safty and life so I wraped muself in a blanket and stood at the back of my cell. Sat Jason Taylor sprayed me I Panicked trued to run but had no Place to go I slipped on the Mace hit my head then Sat Jason Taylor told me to "Cuff Up" as I trued to get back to the door, I get sprayed a second time I don't know by who because of the first C.C. spray. When I finally get to the door they Pull my blanket through the bars and cuff me up. Officer Boarders and Sat Jason Taylor Violated My 8th amendment cruel and unusual Punishment Excessive force was used on me odrc Policy 5120-9-04 state no inmate or offerders under the supervision of APA will be subsected to Personal abuse Corporal Punishment, Personal invury, disease, Property Jamage, or harasment and 31-SETTI-02 state all Persons employed by ODRC are expected to conduct themselves in a Personal, law-abiding Manner. Failure to comply with standards of Employment conduct shall resault in discipline, up to and including removal. I requested a lie detector test in Pursuant 5120-9-27 and was denied.

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Failure To Preform Job duty:

21. 10-24-21 lunch time while I was in D-1 hunger strike cell officer Crabtree opened the first door to my cell and asked if I wanted to eat I told him "No". Officer Crabtree then stated "You Miggers gone stop refusing these trays" referring to me and my Mieghbor immate Weaver 641-925 who was also on hunger strike and witnessed this entire incident. After hearing the racial remarks towards me and my nieghbor I then asked officer Crabtree for a informal complaint and kites to write him up. Officer Crabtree then stated "Fuck that write up I'll come in there and harpa Your ass" officer Crabtree then Opened the 2rd door to my cell as if to make an attempt to come in and hanga me, but he immediately closed the Door and walked away but he did not lock it at this time I began to fear for my life knowing my door was Still unlocked. Officer Crabtree Violated My 8th Amarchizent and ODRC Policys 5120-9-04, 31-SEM-02

Cruel and Unuseual Punishment

Cruel and Unuseual Honishment
22.10-24-21 Leutenat B. Willians wall called by Officer M. Dotson
because of my 2nd cell door was open an I was outside of it requesting
a Leutenat. Leutenat Bower approched my cell with his O.C. Spray
in hand I immediately walked to the back of my cell and Put
my hands on the Wall, Leutenat Bower with Mo Verbal commands
Placed the O.C. Spray into the corner of my door and sprayed
the entire can into my cell. This caused me to lose my breath for a
Period of time in witch I began to lose Consious, I fall thit my head
my neck and back immediately began to hurt. I wake up to
the Leutenat coming back to my cell and told me to get off the
floor an cuff up an I complyed. The Leutenat violated my 8th
Amendment cruel and unusual funishment.

(8)

Cruel and unusual Punishment

23. 8th amendment states that I have the right to be free from Cruel and Unusual Ponishment. 1-25-22 I was excorted from K-1-61 to J-2 without a Supervisor. Officer Stringer along with another officer I don't know the name of excorted me while twisting and Pulled my wrist and thumbs like a "Joystick" to the Point I lost feeling and I was repeatedly slamed to the ground and draged down the hallway to the Point my right knee was fat and swollen and my neck and back was in extream Pain. No Nurse came to record my induries on my use of force Report I stated "use of force was used on me". The officers that Partook in the assault on me violated my 8th Amendment Cruel and unusual Punishment.

24. Improper/inadequate medical care

ON 1-21-22 I was escorted to medical to see FLP. Mr Conley for injuries that took Place on a Use of force on 1-15-22. I had injuries to my thumbs, wrist, neck, Back, and knee. These injuries was not recorded till 1-21-22 by medical. I explained to mr conley how I was in extream Pain and I need X-Rays and MRI's of the injured areas. Mr Conley refused to adder to have X-Rays and MRI's. All he did was give me Ibprofin and sent me on my way to suffer in Pain. This is Improper/inodequate Medical care and Cruel and Unusual Punishment.

Failure To Preform Job Duty:

25. In Pursuant 07-ORD-01 section (B)(1) Public Records state the Public Records Coordinator stall Manage the Processing of Public Records request and arrange for an area to accomodate in-Person inspection. The Public Records Coordinator shall be responsible for approving the material to be inspected or copied and Keeping a written record of each request and response there to Public Records Coordinator Larry Green violated ODRC Policy O7-ORD-01 and failed to Properly do his Job I sent Public record request in writing and on the Kiosk to Larry Green and sought the use of Force reports for the Dates 1-15-28, 10-24-21, 10-221-7-2021 and was Jenied. Larry Green Violated Ohio Public Records act and ODRC Policy 07-ORD-01 Public Records.

Extraustion of Legal Remedies:

26. Plaintiff Antonio Johnsont 640-044, Used the Prison arievance Procedure and was derived Plaintiff appealed to the Cheif legal inspector and was also derived Plaintiff attempted to resolve these matters but was deliberately and intentionally ignored. Attached to the back of this complaint is exhibits.

Legal Claims

27. Plaintiff Antonio Johnson #640-044 reallege and incorporate by reference Paragraph 1-26

28. Derelection of Putu, Failure to Protect from Harm, Failure to Proform Job duties, and cruel and unusual Punishment, Timproper/inadequate medical care violated Plaintiff Fintonio Johnson #640-044 rights and constitued inapropreate Supervison standards of employee Conduct, and Failure to Protect. Under the 8th amendment to the United States Constitution.
29. The Plaintiff has no Plain, adequate, or complete remedu at Law to Redress the wrongs described herein. Plaintiff has and will continue to be irreparably injured by the conduct of the defendants unless the court grant the declaratory and injuctive relief witch Plaintiff seeks.

Prayer For Relief

30. wherefore, Plaintiff Antonio Johnson 1640-044, respectfully Prous that this court Enters Judgement granting Plaintiff: 31. A declaration that the acts and omissions described here in Violated Plaintiff's right's under the constitution and Law of the United States.

32. A Preliminary and Permanent injunction ordering defendants. Annette Chambers-Smith, Ronald Erdos, Linnea Mahlman, Sat Jason Taylor, officer Borders, officer crabtree, Lt. B. Williams, Lt. Bauer, Lt John Doe, Officer Stringer, Officer John Doe, Larry Green, ALP. Mr. Conley. To follow ODRC Policy John Doe, Larry Green, ALP. Mr. Conley. To follow ODRC Policy 31-SEM-02, 07-ORD-02, 64-Dem-01

- 33. Morrial Darriages in the amount of \$50,000.00 apainst Each defendant, Jointly and Severally.
- 34. Compensatory Damages in the amount of \$50,000.00 against each defendant, Jointly and Severally.
- 35. Punitive / exemplentory Damages in the amount of \$50,000,000 against each defendant, Jointly and severally.
- 36. Monetary Damages in the amount of \$50,000.00 against each defendant, Jointly and severally.
- 37. Not to be charged money to be housed by ODRC.
- 38. Proper Medical care.
- 39. A Jury Trial on all issues triable by Jury.
- 40. Plaintiff's cost in this suit.
- 41. A institutional Transfer
- 42. Any additional relief this court deems Just, Proper, and Equitable.

Respectfully Submitted

Antonio Johnson 4640-044
1724 St. Route 728
Lucasville, OH 45699

Verification
I have reread the foraoing complaint and hereby verify that it states the facts as asserted therein based upon knowledge and information recived. I certify under Penalty of Persury that the above facts are True an Correct.

Executed at Lucasville, Ohio 45699 on 1-8-2023

Antonio Johnson

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Informal Complaint Resolution

01.21-	070
Institution: SOC	F

Top section to be completed by inmate, within 14 days of incident.

Inmate will forward the White & Canary copies to the supervisor of the staff person or department most responsible for complaint; Forward Pink copy to the Inspector; and keep the Goldenrod copy.

Submitted To: 1st Shift Capton		Date Submitted: -11-24
Inmate's Name: H17+ONIO JOHNSON	Number: 640 044	Housing Assignment 35

Complaint Regarding: On 1-7-2021 I had boarded up my cell to use the rest room. The officer working did a round this was the first round pyor to me boarding my cell up the said Toke the board down I said to the calls for a I tell him respectfully for talk to me with respect I he I will him he waves the Ca Mace can at me tells me to shot the fuch up are him he waves listion an keep the board up out my window while he is talking I wap the sprais me I trued to run had no where to go I sho on the partic side this my head Then he stated "cuff up" Then as I fir trying to get to the Door I pet sprauced a second time I don't know who by I wet to the Door I pet sprauced a second time I don't know who by I wet to the Excessive force was used on me an Imapproj rite supervision to these facts an the lack of the a introver the Supervision to these facts and the lack of the reason to use any force on me Most these facts I am fearing for my safty and Life.

Lower Section to be completed by the supervisor of the staff person or department most responsible for complaint.

Return Canary copy to immate within 7 calendar days. Send White copy to the Inspector.

sponse):
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HECEIVED

This is under current Investightour

JAN 1 9 2021

CAPTAIN'S OFFICE

Use of Force
RIB SOCF-21,000054

16 1 4 2 M

RECEIVED

S.O.C.F. INSPECTOR

Stan Member's Signature and Title: Date: 1-1621

Complaints not resolved may be addressed in accordance with 5120-9-31.

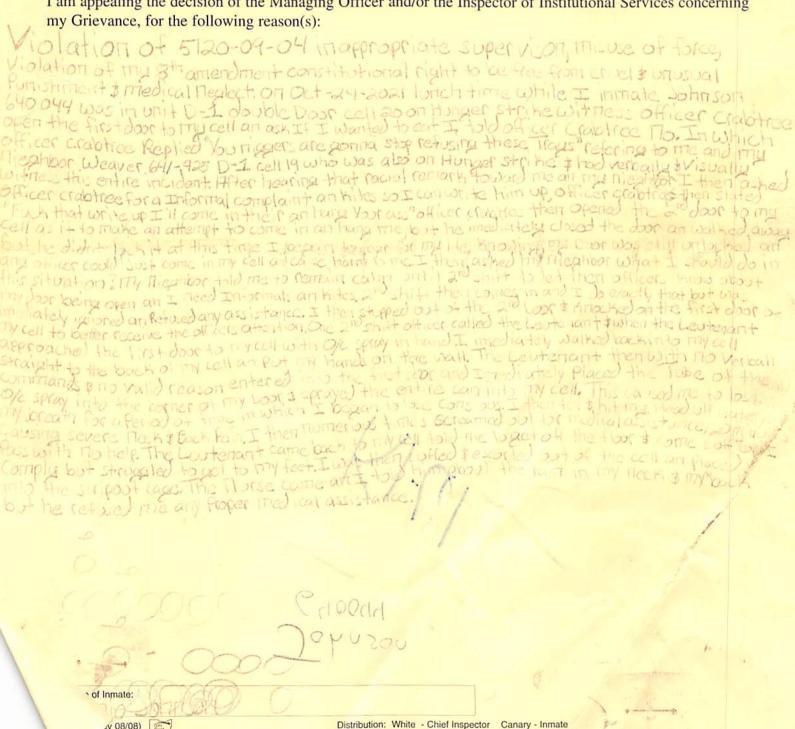
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Appeal to the Chief Inspector

Name: Fritorio Soturson	\	Number: 640-044
Institution: SOCF	Grievance No.	Date: 12-14-21

INSTRUCTIONS: Complete Appeal form. Attach a copy of the Notification of Grievance, Disposition of Grievance, and Supplemental Disposition of Grievance and/or informal complaint, if used. Submit to: CHIEF INSPECTOR, 770 West Broad Street; Columbus, Ohio; 43222.

I am appealing the decision of the Managing Officer and/or the Inspector of Institutional Services concerning



12:14

hnoeh?

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NOTIFICATION OF GRIEVANCE

Name:	Institution:
Number:	Grievance No. (To be completed by Inspector's Office):
Housing Assignment:	Date:
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B. I will experience a substantial risk of PHYSICAL	INJURY if this grievance is not promptly addressed. ☐ Yes ☐ No
10.00	
C. I filed an informal complaint on Date with	Name Position
(Attach informal complaint resolution).	
D. I have read Administrative Regulation 5120-9-31.	☐ Yes ☐ No
1 1	
Inmate Signature: 10/10 10/17/50 17 640044	And the second s
DISTRIBUTION: WHITE & CANAL	RY - Inspector PINK - Inmate ACA 4271, 4331

DRC 4088 (Rev. 11/01)

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NOTIFICATION OF GRIEVANCE

No.	5
Name:	Institution:
Number:	Grievance No. (To be completed by Inspector's Office):
Housing Assignment:	Date:
	y one incident or concern. Include what would solve
your complaint.) 07 1-15-22 DK	L Molicy 64-DCM-01 was
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B. I will experience a substantial risk of PHYSICAL	INJURY if this grievance is not promptly addressed.
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C. I filed an informal complaint on 1-15-22 with	h 1 shift captor an inspector
Date	Name Position
(Attach informal complaint resolution).	
D. I have read Administrative Regulation 5120-9-31.	☐ Yes ☐ No
Inmate Signature:	
Inmate Signature: 47710-201715017 690049	

DRC 4088 (Rev. 11/01)

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NOTIFICATION OF GRIEVANCE

Name:		Institution:	
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Number:	Grievance No. (To be com	pleted by Inspector's Office):	Ce
Housing Assignment:	Date:	001-14	Ch.
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your complaint.) Violation of 5120-0	99-04 inapropri	rate supervision	Rotalinain
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Violation of my 8th amendmen	it constitution	tal right to be +	rec from
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	☐ Yes	□ No	
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I filed an informal complaint on Name Position (Attach informal complaint resolution).

I have read Administrative Regulation 5120-9-31. ⊠ No

Inmate Signature:

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NOTIFICATION OF GRIEVANCE

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Name:	1	Institution: 50(F	1
Number: 1640-044	Grievance No. (To be comp	oleted by Inspector's Office):	
Housing Assignment:	Date:	4	
A. Explain your complaint. (Be specific. Address onl	y one incident or o	oncern. Include what would solv	/e
your complaint.) [(cal reg lect	on Fall de	I mus escorted	jes
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MAPPER ON 1-15-22 MY	Mouries la	las not Recorded til	
1-20-22-1714 right Thu	Imb, on the	bleft side has no fe	elir
any right wrist on the let	t Side Has	deep cut an I ho	ve
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B. I will experience a substantial risk of PHYSICAL	INJURY if this g	rievance is not promptly addresse	ed.
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Date	Name	Position	
(Attach informal complaint resolution).			
D. I have read Administrative Regulation 5120-9-31.	☐ Yes	□ No	
Inmate Signature: Hatana Son 540044	the same of the same of		
	NA.		

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Appeal to the Chief Inspector

Name: Antonio Johns	203	Number:
Institution: SOCE	Grievance No.	Date:

INSTRUCTIONS: Complete Appeal form. Attach a copy of the Notification of Grievance, Disposition of Grievance, and Supplemental Disposition of Grievance and/or informal complaint, if used. Submit to: CHIEF INSPECTOR, 1050 Freeway Dr. North; Columbus, Ohio; 43229.

I am appealing the decision of the Managing Officer and/or the Inspector of Institutional Services concerning my Grievance, for the following reason(s):

Medical regulect on Farm I was excerted to medical to sus
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that frevers up my arm when my wrist or Thumb is bent a Pacific way.
A STATE OF THE PARTY OF THE PAR
Corrley refused to order to have done my right lower rines is black, blue, and Vellow. This Dris believe been to feel order to have done my right lower rines is black, blue, and
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Problems to this very way 2 13 2 on the areas I dan stoke on On my
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completed on 1-15 22 that is five the mas are being lover to at the for
Completed on 1-15 22 that is 1.15 things are being lover up at this from toock. This Dreamley also violated DRC Policy 64-DC171-01 what would solve
my complaint & Rev. un MR. Foliay 64-DC171-01 what would solve
the found out proposed expert in their areas an when
for his Poor Practices an cruel an Unusual Propose for how are
indure my insuries Pains with no Proper documentation or Belief
The state of the s

Signature of Inmate:

Case: 1:23-cv-00039-MWM-KLL Doc #: 1 Filed: 01/23/23 Page: 22 of 28 PAGEID #: 22

Appeal to the Chief Inspector

Name: Antonio Johnson		Number: 640-044
Institution: 50CF	Grievance No. 2-22-17	Date: 2-26-82

INSTRUCTIONS: Complete Appeal form. Attach a copy of the Notification of Grievance, Disposition of Grievance, and Supplemental Disposition of Grievance and/or informal complaint, if used. Submit to: CHIEF INSPECTOR, 1050 Freeway Dr. North; Columbus, Ohio; 43229.

I am appealing the decision of the Managing Officer and/or the Inspector of Institutional Services concerning my Grievance, for the following reason(s):

On 1-15-22 DRC Policy 64-DCM-01 was violated animy constatutional ant to be free from cruelan unusual funishment was violated as well. I was escorted by two officers from K-1-61 to san Hit out cases. no white shirt was present at my cell when I culted up an was tulled out of 1774 cell of when I was eswited down the Itall. While I was escarted I was tortured up turmented me the entire way to Ja Stripout cape. They slammed me in handcufts an snachies ceveral i brusing my knee cap, they bent an twisted my thomis will wr the Point I could not feel them. This is on DVR. Thy mech aswell as my Back. I did not get my Pack up I went from the 15th to the 27 with no blankets or sheets. On the 274 ha had blanket exchange seen on LVR an the officer working that day gave inc to Sto the fact. I did not reside medical treatment that day Seen on LVR no nurse was at the stripport case to record my sever still soffer from today 2-13-22. I stated for "Force was used on me an I was trying to comply" force where the result anded "CHOPGI

Signature of Inmate:

DRC 4146 (Rev 3/02)

Oher phoops

Case: 1:23-cv-00039-MWM-KLL Doc #: 1 Filed: 01/23/23 Page: 24 of 28 PAGEID #: 24

Informal Complaint Resolution

Institution: SOCF

Top section to be completed by immate, within 14 days of incident.

Inmate will forward the White & Canary copies to the supervisor of the staff person or department most responsible for complaint; Forward Pink copy to the Inspector; and keep the Goldenrod copy.

Submitted To: Tascectoc/ 200 Shift	Captor	Date Submitted: 10-24-21
Inmate's Name:	Number: 640.044	Housing Assignment:
Calian II Casa Casal	The state of the s	and nutral the and a

Complaint Regarding: Page 2 continue > Then stepped out of the 2" I shift officer called the Leutenant & when the Leutenant approached the first door to my cell with O/c spray in hand I intediately walked into my cell straight to the back of my cell and Put my hands on the wall. The Leutenant Hien with no Verball commands 3 no Valid reason entered into the first Door and Irrediately Placed the Tube of the O/c spray into the corner of my Door & sprayed the entire can into my cell. This caused me to lose try breath for a Period of time in which I began to lose Consious. I then fell thit my Head ultimately causing severe neck & Back Pain. I then Tumerious time screamed out for Medical assistance. 20 minutes pass with To Help. The Leutenant came back to my call told me to get off the floor ome cut be I comply but struggled to get on my feet. I was then cutte ted out of the cell an Placed into the stripout cage, The with the Pain in my neck is back but he refused my any trape medical assistance. I am requestions that officer crabtree, The Leuterrant & medical staff be help accountable for my injuries emotional distress \$ mental anguish \$ face an employee Disciplinary Hearing for Violating institutional Policies

Lower Section to be completed by the supervisor of the staff person or department most responsible for complaint.

Return Canary copy to inmate within 7 calendar days. Send White copy to the Inspector.

Action Taken (Cite appropriate policy, procedure or regulation in response):

Staff Member's Signature and Title:	The second	Date:

Case: 1:23-cv-00039-MWM-KLL Doc #: 1 Filed: 01/23/23 Page: 25 of 28 PAGEID #: 25

Informal Complaint Resolution

Institution:		
	50C	-

Top section to be completed by inmate, within 14 days of incident.

Inmate will forward the White & Canary copies to the supervisor of the staff person or department most responsible for complaint; Forward Pink copy to the Inspector; and keep the Goldenrod copy.

	Submitted To: TUSOPC + TOC / DING St	ift contant	Date Submitted:
	Inmate's Name:	Number: 6400-14	Housing Assignment:
	Complaint Regarding: Violation C	of 5120-9-04 in	apropriate supervison
11115	DE OF FORCE. VIOLATION AL	TTU STO CON CONTRACTOR	Learned Lillian al and I lillian
LE +	the from cruel & unusual	Punishment 3 media	al reglect on Oct-24-20
cell	20 on Humana Clark	The state of the state of	1 Unit D-1 double para
1 1 1 1 2			
Tie.	cell an ask If I wanted to er crabtree Replied "You n'	iggersare connastor of	rabtree Mo. In which
tho	Typically & room weather 64	1-925 D-1 cell 19 11/19	these trays refer ing to
en	ark toward me an my mie	this entire incident	t. After hearing that me
Strat	ark toward me an my mie of "Fuck that write up I'll co	SO I can write him u	officer crabtnee for a
Open	ed the and write up I'll co	me in their an hand	AND HE TOTTE THEFT
ne, 1	ed the 2nd door to my cell out the linedlately closed the a began to fear for my life the could have to could have to come in the ter could have to the could have to the could have the could have to come in the ter could have the course of the could have the co	as if to make an at	tempt to come in on the
THIC	I began to fear for my life the could Just come in my control what should I do in this your what should I do in the Hand Shift to let the Hand Informals and Kites.	howing My Door W	out he did not low the arthur
Tiep	ibar what should I do in this	ell an cause harm to	me. I then asked Thy
La ITI XTI 正	med The shift to let the H	ner officers Know	hoor told me to remain
Jas	need Informals and Kites. 3	shift then comes in	and I do exactly that had
		acl off2	end.
	Lower Section to be completed by the super Return Canary copy to inmate	rvisor of the staff person or depar within 7 calendar days. Send Wh	
	Action Taken (Cite appropriate policy, proce		
	I spoke with Officer Crobrien as	bout your allegations,	Other Contract
	Denies your allegations.		

Staff Member's Signature and Title:

Date:

Force policy.

Case: 1:23-cv-00039-MWM-KLL Doc #: 1 Filed: 01/23/23 Page: 26 of 28 (RAGEID #: 26

Informal Complaint Resolution

IAN	Institution:	-
AULA	20 (1)	

Date Submitted:

Top section to be completed by immate, within 14 days of incident.

Inmate will forward the White & Canary copies to the supervisor of the staff person garage ment most responsible for complaint; Forward Pink copy to the Inspector; and keep the Goldenrod copy.

	HINTONIO	Johnson	640	044	riodaling Assignment.	2-11
(Complaint Regarding:	Medical	neglec	t. On 1-	-21-22 IW	as escorter
10/1	redical to si	ee Lr Cor	mor ab	out My	medical 13	ssues
Ha:	t still exsist	t to this v	very day	1. These		nJuries
Tapp	Pen on 1-15-	22 my ins	uries wo	asmoth	ecorded 4111	1-20-22
MY (ngh+Thumb	on the left	- 51de 17a	s no feel	ing, my syant	wriston
the 1	iv orm when	a deep cut	or Thurs	his hard	a Pacific W	hat travels
Sami	e thing apply	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	, w/121 ages	1 1101116	OF THE DIGHT	- SIDE ITTY
owe	r mech betwe	ELL 111/2 211016	per place	-S, an 104	der backtic	ITI pytheno-
Pair	from the Us	e of force	Used on	me on	1-15-22 IU	vent to see
the	Dr to explain	to minu I	EED X-1	rays and	MRIS to +	ind out.
the	extent of th	e Danninge	WITCH	re retus	ed to order	to have
done	e my right los	wer hime is	blach, by	e, an Vella	1 TIS IS ITING	apropreate
DUPE	ervision. Ca	11 YOU HELP	THE WITH	Hais mic	ATTER S	
_						
	Lower Section to be co	ompleted by the super	visor of the staff	person or depar	tment most responsible f hite copy to the Inspector	or complaint.
=	Action Taken (Cite appr					
,	ma Johnson					
1A	OCL 1110-0 2	- by an RA) following	a vof	incident on 1	-15-770
Q	medical excluded to you	- report ux	is complete	D. you	placed a HKR	Da D 118
0	related to your	r Complai	nto ad	Was son	- by another	BALOW NOW
E	valuated on 1	10155, OE	andy.	to Protoc	of A 2.35 NS	SC. You Was

Complaints not resolved may be addressed in accordance with 5120-9-31.

Date:

Staff Member's Signature and Title:

Submitted To:

Inmate's Name

Case: 1:23-cv-00039-MWM-KLL Doc #: 1 Filed: 01/23/23 Page: 27 of 28 PAGEID #: 27

Informal Complaint Resolution

Institution:	00	E

Date Submitted:

Top section to be completed by inmate, within 14 days of incident.

Inmate will forward the White & Canary copies to the supervisor of the staff person or department most responsible for complaint; Forward Pink copy to the Inspector; and keep the Goldenrod copy.

	Haton o Johnson 1640049 Housing Assignment 18 2-17	
1	Complaint Regarding: Innapropreate supervision retaluat	05
DL	a VIOLATIANT OF THE ASSOCIATION	0
410	on covel and unuseval purishment I was	
971	d the officers twisted an Pulled The white shirt	
1119	ie a Joy stick to have	5
Sla	armen the to the and in 1 ost teeling an repeate	dly
10	the Point my right knee was fat an my neck & ba	Ilwa
511	on my use of force statement To date of the ment	CK
517	me while I was corroper afting the whole to proce was to	200
all	This can be seen of DUR TELL WHOLE TIPTE	37
77)	I was placed to a was placed to	
TUS	was placed in the stripsut cage an forced stoped being used	(
Sti	Il there. The DVR from 1-15-22 can support all this	-8
	Lower Section to be completed by the supervisor of the staff person or department most responsible for complaint. Return Canary copy to inmate within 7 calendar days. Send White copy to the Inspector.	
	Action Taken (Cite appropriate policy, procedure or regulation in response):	-
	The life of	
	Its use of force which is on bur; AND	
	Supervisor will In Vestignte once (they) Accious	
	Packett.	
		4

Complaints not resolved may be addressed in accordance with 5120-9-31.



Staff Member's Signature and Title:

Submitted To:

Case: 1:23-cv-00039-MWM-KLL Doc #: 1 Filed: 01/23/23 Page: 28 of 28 PAGEID #: 28 Southern Ohio Correctional Facility Outgoing Inmate Mail Locasville Oh 45099 RECEIVED JAN 1 3 2023 DEBORAH'S. HUNT, Clerk Office of the clerk United States Court of Appeals
100 E.F.Ath Street, Room 540
Cincimnati Ohio
45202-3988